

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084102

FILED
Apr 29, 2005
Secretary of State

Entity Name: THE RESTAURANT WANTS YOU, INC.

Current Principal Place of Business:

1042 SOUTH MIAMI AVENUE
MIAMI, FL 33130

New Principal Place of Business:

525 LINCOLN ROAD
MIAMI BEACH, FL 33139

Current Mailing Address:

1042 SOUTH MIAMI AVENUE
MIAMI, FL 33130

New Mailing Address:

525 LINCOLN ROAD
MIAMI BEACH, FL 33139

FEI Number: 42-1580856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTERNATIONAL REGISTERED AGENTS CORP.
338 MINORCA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GABLES REGISTERED AGENTS CORPORATION
338 MINORCA AVENUE
CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MANUEL E CABEZA

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DOINO, TONINO
Address: 1042 SOUTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33130

Title: S () Delete
Name: SALIAMONAS, PETER
Address: 1042 SOUTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33130

Title: T () Delete
Name: DOINO, PAOLO
Address: 1042 SOUTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DOINO, TONINO
Address: 525 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: S (X) Change () Addition
Name: SALIAMONAS, PETER
Address: 525 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: T (X) Change () Addition
Name: DOINO, PAOLO
Address: 525 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONINO DOINO

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date